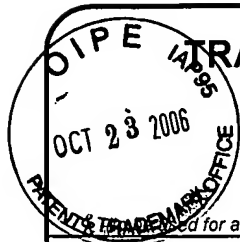


IFW

TRANSMITTAL  
FORM

Use for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/599,355
Filing Date	May 26, 2006
First Named Inventor	Keith Alan Charlton
Art Unit	
Examiner Name	
Attorney Docket Number	KLBS0011-100

## ENCLOSURES (check all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/déclaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Executed Power of Attorney documents for all inventors (3 pages) |
|--|--|---|

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Cozen O'Connor

Signature

Printed Name

Paul K. Legaard

Date

OCTOBER 19, 2006

Reg. No.

38,534

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Typed or printed name

Paul K. Legaard, Registration No. 38,534

Date

October 19, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PTO/SB/81 (04-05)  
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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	To Be Determined
Filing Date	Herewith
First Named Inventor	Keith Alan Charlton
Title	Methods For Inducing Autolysis In Infectious Bacteria
Art Unit	To Be Determined
Examiner Name	To Be Determined
Attorney Docket Number	KLBS0011-100 (P38578US)

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

35151

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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State

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Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	I.D. Broadbent	Date	30th August 2006
Name	Ian Broadbent	Telephone	
Title and Company	Inventor, Haptogen Ltd		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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and  
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Application Number	To Be Determined
Filing Date	Herewith
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Art Unit	To Be Determined
Examiner Name	To Be Determined
Attorney Docket Number	KLBS0011-100 (P38578US)

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

30/8/06

Name

Andrew Justin Raddcliffe Porter

Telephone

Title and Company

Inventor, Haptogen Ltd

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

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Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>K. Charlton</i>	Date	30/08/06
Name	Keith Alan Charlton	Telephone	
Title and Company	Inventor, Haptogen Ltd		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of forms are submitted.

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October 19, 2006

**VIA AIRMAIL**

**Catherine T. Hill**

Paralegal

Direct Phone 215.665.2034

Direct Fax 215.701.2095

[chill@cozen.com](mailto:chill@cozen.com)

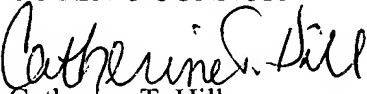
Nick Bassil  
Kilburn & Strode  
20 Red Lion Street  
London, WC1R 4PJ  
UNITED KINGDOM

**Re: U.S. National Phase Application of PCT/GB2005/001108, filed March 24, 2005  
S.N. 10/599,355, Entitled: "METHODS FOR INDUCING AUTOLYSIS IN  
INFECTIOUS BACTERIA"; Keith Alan Charlton et al.  
Your Ref.: P38578US; Our Ref.: KLBS0011-100 (190245)**

Dear Nick:

Please be advised that we filed the executed power of attorney documents by all inventors with the U.S. Patent and Trademark Office on October 19, 2006 in connection with the above-identified U.S. patent application. A copy of the filed documents is enclosed for your records.

Sincerely,  
COZEN O'CONNOR

  
Catherine T. Hill  
Paralegal

:CTH

Enclosures

cc (w/enc.): Claire Crispin, Foreign Filing Dept.